DATENT	ADDLE	CATION	CEE	DETERMIN	ATION	DECORD
PAIPNI	ו ואאם	CALICIN		DETERMIN	AIKIN	RECORD

Effective October 1, 2001

Application or Docket Number

10053737

CLAIMS AS FILED - PART I						SMALL ENTITY			OTHER THAN			
		(Column 1)		(Column 2)		TYF	TYPE		OR	OR SMALL ENTIT		
TOTAL CLAIMS		29				F	ATE	FEE		RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			∂9 minus 20=		* q'		×	\$ 9=	81	OR	X\$18=	
INDEPENDENT CLAIMS			"U minus 3 =		* ₽		>	(42=	42	OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESE			RESENT	ESENT			+	140=	ż	OR	+280=	
at If the difference in column 1 is loss than zero, onter "0" in column 2								OR	TOTAL			
CLAIMS AS AMENDED - PART II											OTHER THAN	
(Column 1)			. (Columi			(Column 3)		SMALL ENTITY		OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	IEST IBER OUSLY FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9= X42=		OR	X\$18=	
ME	Independent	*	Minus	***		=	×			OR	X84=	g ·
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	TCLAIM		+	140=		OR	+280=	
TOTAL OR										TOTAL	. 40	
		-1						IT. FEE		On	ADDIT. FEE	
_		(Column 1)	_		mn 2) HEST	(Column 3)	ı —			- 3		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Į Į	Total	*	Minus	**		=] ×	\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=	×	42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		J _	140=		OR	+280=	
							L	TOTAL IT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)		II. FEE			ADDIT: I'EE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUM PREV	HEST MBER OUSLY FOR	PRESENT EXTRA	1 🗆	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MO	Total	*	Minus	**		=] [×	\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***]=		 (42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF M	IULTIPLE DI	PENDEN	IT CLAIN		┚┝╌		 	1		
	If the entry in colu	ımn 1 is less than	the entry in co	ılumn 2 wri	te "0" in c	olumn 3	L	140=		OR	+280= TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE												
***If the Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												